

Testimony on
House Bill 5744 An Act Concerning Childhood Immunization
House Bill 6158 An Act Concerning Vaccine Distribution
Public Health Committee
March 8, 2013

Senator Gerratana, Representative Johnson and members of the Public Health Committee, on behalf of the more than 8,000 physicians and physicians in training of the Connecticut State Medical Society (CSMS), American Academy of Pediatrics Hezekiah Beardsley Connecticut Chapter (CT AAP), and Connecticut Academy of Family Physicians (CAFP), I am here today to provide this testimony on House Bill 5744 an Act Concerning Childhood Immunization and House Bill 6158 An Act Concerning Vaccine Distribution.

Since last May in the waning days of the 2012 legislative session when it was announced that pediatric providers would be mandated to use only state-provided vaccine, we have been working to address the shortcomings of the program. While we do not believe that mandates are a good solution to any aspect of medicine, we recognize that this program is more than likely going to persist, and our goal now is to make it workable and productive for providers, for the Department of Public Health and most especially for the children for whom our physicians care.

Since this new mandate went into effect on January 1 of this year, there have been significant billing issues with commercial payers, and also with Medicaid. Frankly, none of this is connected to the Connecticut Vaccine Program itself, but we tell you this to demonstrate the difficulties that pediatric providers are having with insurers. Most of the “glitches” will be made right, and practices paid, but at this point, there are practices that are waiting to be paid on thousands of dollars of “mistakes.”

As you may know, it is documented that it costs a provider approximately \$24 to administer a vaccine. This includes either the physician or registered nurse giving the vaccine, plus practice costs such as monitoring the temperature logs, gloves, needles, information sheets, etc.

Medicaid currently pays \$12, and only \$6 if the nurse gives the vaccine. So, as you can see, immunizing children on Medicaid is quite honestly a bad business decision. However, the vast majority of pediatric providers choose to care for these children, and eat the cost. They feel it is a part of their duty. But, this doesn't mean the providers should be forced to lose money when they care for children on commercial plans.

The last item I will address is Connecticut child immunization rates. It was stated by some in the administration that somehow the vaccine program would increase the immunization rate in Connecticut. We are doubtful that this mandate will help any rates. There is no evidence that providers in CT are not able to get vaccine and thus are unable to vaccinate children. There is evidence published in the 2011 DPH VaxFacts Newsletter, however, that CT children entering school at kindergarten are 99% vaccinated. In fact, CT Immunization Program won awards for “maintaining some of the highest immunization rates in the nation”.

Our suggestions are as Dr. Carbonari suggested in her testimony.

- A workable and reliable on-line ordering system be available within 6 months
- Allow providers to bill insurers for vaccine product-related expenses
- Form a committee of stakeholders to help DPH improve this program for children, providers and the Department
- If these points are not possible, allow providers to opt out of the program

And, lastly, so that the patients are not charged for any preventive care, a language suggestion to HB 5744:

That chapter 368a of the general statutes be amended to (1) require the Department of Public Health to provide health care providers who vaccinate children with vaccines available to the department from the National Centers for Disease Control and Prevention, **(2) allow health care providers to charge for services and care delivered to patients for expenses related to vaccines**, and (3) require the Department of Public Health to establish a childhood immunization advisory council.

Thank you for the opportunity to provide this testimony to you today.